

POSITION DESCRIPTION (Please Read Instructions on the Back)

2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other		3. Service		4. Employing Office Location		5. Duty Station		6. OPM Certification No.	
Explanation (Show any positions replaced) Standard MWR NAF PD		7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt		8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest		9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		13. Competitive Level Code	

10. Position Status <input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)		11. Position Is <input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither		12. Sensitivity <input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive		14. Agency Use NAF	
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15. Classified/Graded by	Official Title of Position	Pay Plan	Occupational Code	Grade	Initials	Date
a. Office of Personnel Management						
b. Department, Agency or Establishment						
c. Second Level Review	Customer Service Leader	NF	2091	02	SN	12-31-01
d. First Level Review						
e. Recommended by Supervisor or Initiating Office						

16. Organizational Title of Position (if different from official title)	17. Name of Employee (if vacant, specify)
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18. Department, Agency, or Establishment	c. Third Subdivision
a. First Subdivision	d. Fourth Subdivision
b. Second Subdivision	e. Fifth Subdivision

19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.	Signature of Employee (optional)
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20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that	this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.
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a. Typed Name and Title of Immediate Supervisor	b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)
Signature _____ Date _____	Signature _____ Date _____

21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.	22. Position Classification Standards Used in Classifying/Grading Position OPM PCS for Sales, Store and Clerical Series GS-2091 TS-46 Jun 63
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Typed Name and Title of Official Taking Action S. J. NEW Principal Classifier		Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.	
Signature _____	Date _____		

23. Position Review	Initials	Date	Initials	Date	Initials	Date	Initials	Date	Initials	Date
a. Employee (optional)										
b. Supervisor										
c. Classifier										

24. Remarks

25. Description of Major Duties and Responsibilities (See Attached)

NONAPPROPRIATED FUND POSITION DESCRIPTION JOB TITLE: Customer Service Clerk Leader
POSITION NUMBER 01-0060

JOB SERIES: 2091 **PAY LEVEL:** NF-2 **Summary of Duties:**

Assists supervisor by leading and directing subordinates, answering questions, passing on instructions, resolving problems which arise, training new employees, and ensuring the smooth flow of operations.

Performs a full range of services such as assisting customers, taking special orders, providing layaway services, following up on delinquent payments, making refunds and adjustments, resolving routine complaints, and any other customer service related duties or transactions.

Maintains a complete and systematic set of records relating to customer service transactions. Checks to ensure the periodic procurement of supplies and equipment required for an efficient operation.

Performs other related duties as assigned.

Minimum Qualifications:

One to two years experience in retail sales. Ability to lead employees in performance of their duties. Knowledge of basic accounting and cash handling. Ability to operate a cash register. Ability to lift and carry objects weighing up to 30 pounds.